VIDYASAGAR NATIONAL YOUTH COMPUTER CENTRE

Registered by Govt. of India & Govt. of West Bengal.

An ISO 9001:2015 Certified Institution

www.vsnyc.in

**STUDENT REGISTRATION FORM**

**Name of the Student :**

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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**Affix A passport**

**Size photo Copy At**

**Above Box And**

**Signature At Bottom**

**Box**

Signature of the **Name of the Guardian (Father/ Husband/ Other) :**

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**Name of the Mather :**

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**Date Of Birth**

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**Full Address of Centre**

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| P.O |  |  |  |  |  |  |  |  |  |  | | P.S | |  |  |  |  |  |  |  |  |  |  |  |
| Block |  |  |  |  |  |  |  |  |  | Subdivision | | | |  |  |  |  |  |  |  |  |  |  |  |
| District |  |  |  |  |  |  |  |  |  | Pin No.- | | | |  |  |  |  |  |  |  |  |  |  |  |
| **Contact number** |  |  |  |  |  |  |  |  |  |  | Course Name - | | | | | | | | | | | | | |

**Student’s Academic Qualification (Tick mark only) :**

|  |  |  |  |
| --- | --- | --- | --- |
| **Examination** | **Board / University** | **Year of Passing** | **Percentage of Marks** |
| **10th** |  |  |  |
| **12th** |  |  |  |
| **Graduation** |  |  |  |

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| **SC** | **ST** | **Gen** | **OBC** | **BPL** | **CAST Certificate issue Date \_\_\_/\_\_\_/\_\_** | | | | | | | | | | | | | **BPL Card Issue Date \_\_\_\_/\_\_\_/\_\_\_\_** | | | | | | | | | | | | |
|  |  |  |  |  | **CAST Certificate No: \_\_\_\_\_\_\_\_\_\_\_\_\_\_**­­­­­­­­ | | | | | | | | | | | | | **BPL Card No: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** | | | | | | | | | | | | |
| **ADHAR Card No** | | | | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| **VOTER/RATION Card No** | | | | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |

**Details for Selection Category (Supporting Document Should Be Attached)**

**Bank A/C Details**

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| **Name of the A/C Holder** |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| **Bank Name** |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| **Branch of Bank** |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| **Bank A/C No.** |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| **IFSC Code** |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |

**Centre Name : ………………………………………………………………………………………………**

**INSTITUTION’S NORMS:** 1. VSNYC reserves the right of admission and the right to change the day and time of the class. 2. Fee should be paid positively within the due date. Delay in payment will 3. Course fee, once paid will not be refunded under any circumstances. 4. Examination fee must be paid on or before the day scheduled for the first examination. 5. The candidates shall comply with the rules as set from time to time by the

**Date:**

**Signature of the Counsellor or Authority Signature of the student**